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TRAINING EVALUATION

COURSE	DATE	TRAINER	YOUR NAME (OPTIONAL)

Ratings: 1 poor, 3 good, 5 excellent

Statement	Rating	Comment
The content was relevant to my job		
The objectives were clear		
The trainer knew the subject		
The trainer explained things clearly		
Materials and handouts were useful		
The pace was right		
There was enough practice		
Overall rating		
Total		

Confidence on this topic before (1-5) _____ Confidence after (1-5) _____

WHAT WILL YOU USE IN YOUR JOB STRAIGHT AWAY?

WHAT SHOULD WE CHANGE, ADD OR DROP?